FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(5	See instructions)		Office use only		
NAME OF COMMITTEE (in f	(Chec iull) is cha	k if name Enged) c	example: If typying, type ver the lines	12FE4M5		
Adrian Smith f	or Congress		<u> </u>			
	111111	1 1 1 1 1 1	<u> </u>	11111		
ADDRESS (number and s	3321 aven	ue I, suite 6				
(Check if addre	Scottsblut	[NE L	69361	
COMMITTEE E MAN	L ADDDECC	CITY	′ •	STATE▲	ZIP CODE 📥	
Denise@joinAc						
COMMITTEE'S WEB I	PAGE ADDRESS (URL)					
COMMITTEE'S FAX N 308-635-7412	UMBER					
2. DATE 0 1	0 8 Y Y 2 0	° 7				
3. FEC IDENTIFICATION	TION NUMBER	C	00412890			
4. IS THIS STATEM	ENT X NEW (N)	OR	AMENDED (A)			
I certify that I have examin	ned this Statement and to the I	pest of my knowledge	e and belief it is true, correc	and complete		
Type or Print Name of ⁻	Treasurer Denise	e Wright				
Signature of Treasurer	Electronically Filed by	Denise Wright		Date 0 2 M	05 / YYYYY	
NOTE: Submission of fals	se, erroneous, or incomplete in		ect the person signing this S	·	-	
Office Use Only			For further informatic Federal Election Comm Toll Free 800-424-953	nission	FEC FORM 1 (Revised 02/2003)	